

SCC eFile	2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	213510591				
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: SANDIA CORPORATION</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CORPORATION SERVICE COMPANY Bank of America Center, 16th Floor 1111 East Main Street RICHMOND, VA 23219</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: DE</p> </div> <div style="width: 35%;"> <p>DUE DATE: 2/28/2013</p> <p>SCC ID NO: F1658766</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>100</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	100
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COMMON	100					
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: PO Box 5800, Mail Stop 1382</p> <p style="margin-left: 40px;">CITY/ST/ZIP: ALBUQUERQUE, NM 87185-1382</p>						
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: PAUL J HOMMERT TITLE: VICE PRESIDENT ADDRESS: 1515 EUBANK SE CITY/ST/ZIP/CO: ALBUQUERQUE, NM 87123 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> OFFICER <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: PAUL J HOMMERT TITLE: VICE PRESIDENT ADDRESS: 1515 EUBANK SE CITY/ST/ZIP/CO: ALBUQUERQUE, NM 87123	<input checked="" type="checkbox"/>	OFFICER <input checked="" type="checkbox"/> DIRECTOR	
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NAME:	ELIZABETH D KRAUSS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1515 EUBANK SE		
CITY/ST/ZIP/CO:	ALBUQUERQUE, NM 87123		
NAME:	JERRY L MCDOWELL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1515 EUBANK SE		
CITY/ST/ZIP/CO:	ALBUQUERQUE, NM 87123		
NAME:	J STEPHEN ROTTLER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1515 EUBANK SE		
CITY/ST/ZIP/CO:	ALBUQUERQUE, NM 87123		
NAME:	KIMBERLY C SAWYER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1515 EUBANK SE		
CITY/ST/ZIP/CO:	ALBUQUERQUE, NM 87123		
NAME:	RICHARD H STULEN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1515 EUBANK SE		
CITY/ST/ZIP/CO:	ALBUQUERQUE, NM 87123		
NAME:	MICHAEL O VAHLE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1515 EUBANK SE		
CITY/ST/ZIP/CO:	ALBUQUERQUE, NM 87123		
NAME:	BRUCE C WALKER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1515 EUBANK SE		
CITY/ST/ZIP/CO:	ALBUQUERQUE, NM 87123		
NAME:	ELIZABETH D KRAUSS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1515 EUBANK SE		
CITY/ST/ZIP/CO:	ALBUQUERQUE, NM 87123		
NAME:	KATHY L ALLEN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	1515 EUBANK SE		
CITY/ST/ZIP/CO:	ALBUQUERQUE, NM 87123		
NAME:	GLENN E COLE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	1515 EUBANK SE		
CITY/ST/ZIP/CO:	ALBUQUERQUE, NM 87123		
NAME:	MARITZA CORDERO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	1515 EUBANK SE		
CITY/ST/ZIP/CO:	ALBUQUERQUE, NM 87123		

NAME:	SHARLA G HALEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	1515 EUBANK SE		
CITY/ST/ZIP/CO:	ALBUQUERQUE, NM 87123		
NAME:	DAVID A HEYWOOD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	1515 EUBANK SE		
CITY/ST/ZIP/CO:	ALBUQUERQUE, NM 87123		
NAME:	CHARLES PECHEWLYS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	1515 EUBANK SE		
CITY/ST/ZIP/CO:	ALBUQUERQUE, NM 87123		
NAME:	KENNETH R ROSSENRIEDE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	1515 EUBANK SE		
CITY/ST/ZIP/CO:	ALBUQUERQUE, NM 87123		
NAME:	TIMOTHY C KNEWITZ	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	1515 EUBANK SE		
CITY/ST/ZIP/CO:	ALBUQUERQUE, NM 87123		
NAME:	RENA H WHITNEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	1515 EUBANK SE		
CITY/ST/ZIP/CO:	ALBUQUERQUE, NM 87123		
NAME:	MARILYN HEWSON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	1515 EUBANK SE		
CITY/ST/ZIP/CO:	ALBUQUERQUE, NM 87123		
NAME:	DONNA F BETHELL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1515 EUBANK SE		
CITY/ST/ZIP/CO:	ALBUQUERQUE, NM 87123		
NAME:	JAY A BROZOST	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1515 EUBANK SE		
CITY/ST/ZIP/CO:	ALBUQUERQUE, NM 87123		
NAME:	DAVID E DANIEL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1515 EUBANK SE		
CITY/ST/ZIP/CO:	ALBUQUERQUE, NM 87123		
NAME:	WILLIAM G HOWARD, JR.	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1515 EUBANK SE		
CITY/ST/ZIP/CO:	ALBUQUERQUE, NM 87123		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RAY O JOHNSON DIRECTOR 1515 EUBANK SE ALBUQUERQUE, NM 87123	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KATHERINE J KERCHNER DIRECTOR 1515 EUBANK SE ALBUQUERQUE, NM 87123	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PATRICIA L LEWIS DIRECTOR 1515 EUBANK SE ALBUQUERQUE, NM 87123	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES R SCHLESINGER DIRECTOR 1515 EUBANK SE ALBUQUERQUE, NM 87123	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LARRY D WELCH DIRECTOR 1515 EUBANK SE ALBUQUERQUE, NM 87123-0101	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BONNIE APODACA VP,CFO,ASST TR 1515 EUBANK SE ALBUQUERQUE, NM 87123	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KEVIN M BILGER DIRECTOR 1515 EUBANK SE ALBUQUERQUE, NM 87123	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CAROL B CALA DIRECTOR 1515 EUBANK SE ALBUQUERQUE, NM 87123	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ PAUL J HOMMERT SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PAUL J HOMMERT, VICE PRESIDENT PRINTED NAME AND CORPORATE TITLE	2/28/2013 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			